How to Read MPDR Law Enforcement Reports

The Montana Prescription Drug Registry (MPDR) can provide information to law enforcement officers in response to a subpoena related to an open investigation.

Pharmacies typically report prescriptions to the MPDR within 8 days of the date the drug was dispensed. However, if the initial data submission contained errors, those erroneous prescriptions are not stored in the MPDR's database. The pharmacy then has an additional 8 days to correct and resubmit the rejected prescriptions to the MPDR. Your MPDR report reflects the full contents of the MPDR database as of the date and time the report was generated, and is limited to the search parameters provided in the subpoena. The MPDR only provides information as it was reported to us in digital format by licensed pharmacies. The MPDR does not review this reported information for accuracy. If a pharmacy has not reported a prescription to us, we cannot provide you with that information; therefore, your report may not reflect a complete picture of someone's prescription history.

Law enforcement reports are typically delivered in Microsoft Excel format using the State of Montana's File Transfer Service. The File Transfer Service is a secure method of electronically delivering encrypted, HIPAA-protected medical information.

The following columns are included in Excel files produced by the MPDR in response to a subpoena:

Prescription Information: This section gives details about each prescription.

> Prescription Number. This is a unique identifier assigned by each pharmacy when they fill a prescription.

> Date Written. Date the prescriber wrote the prescription.

> Refills Authorized. How many times can the patient refill this prescription?

> Date Filled. When did the pharmacy prepare the prescription?

> Refill Number. If the prescriber authorized refills for a prescription, this column will indicate how many refills have been purchased.

> Drug Name.

> Days Supply. How many days supply were prescribed?

> Drug Dosage Unit. Identifies the unit of measure for the quantity dispensed.

Code	Description
01	Each (solid dosage units or indivisible package)
02	Milliliters (ml)
03	Grams (gm)

> Quantity. How many doses were prescribed?

> Drug Strength. How strong is the prescription? In other words, how much of the drug is included in each dose?

> Payment Type. How did the patient pay for this prescription?

Code	Description
01	Private Pay
02	Medicaid

Code	Description
03	Medicare
04	Commercial Insurance
05	Military Installation & VA
06	Workers' Compensation
07	Indian Nations
99	Other

Date Sold. When did the patient pick up the prescription?

Partial Fill Indicator. Was this a partially filled prescription or did the patient pick up the entire prescription? Optional field.

Code	Description
01	Partial Fill
02	Not A Partial Fill

Patient Information: This section gives details about the patient who purchased the prescription.

First Name.

Last Name.

Suffix. Junior, Senior, etc.

Middle Name.

Address. First line of street address.

Address 2. Second line of street address.

City.

Zip Code.

State.

Country. Only used when the patient is not a resident of the United States.

Telephone.

Date of Birth.

Gender.

Prescriber Information: This section gives details about the provider who wrote the prescription.

DEA#. Unique provider identifier assigned by the U.S. Drug Enforcement Agency. Required field.

License Number. Montana license number. Optional field.

First Name.

Middle Name.

Last Name.

Pharmacy Information: This section gives details about the pharmacy that dispensed the prescription.

Pharmacy Name.

DEA#. Unique pharmacy identifier assigned by the U.S. Drug Enforcement Agency. Required field.

Address. First line of street address.

Address 2. Second line of street address.

City.

State.

Zip.

Telephone.

Contact Name.

Chain Site ID. Optional field. Some large chain pharmacies use this field to identify the specific store.

Compound Drug Information: This section is only used if the prescription was a non-standard, compounded drug. The pharmacy is required to report this information for each drug included in the compound they prepared.

Drug Name.

Quantity.

Dosage Unit. See "Drug Dosage Unit" under "Prescription Information."

3rd Party Information: This section is optional. Some pharmacies provide this information when a third party picks up a prescription on behalf of the patient. All fields refer to the identity of the third party.

First Name.

Last Name.

Relationship. How is this individual related to the patient for whom the prescription was written?

Code	Description
01	Patient
02	Parent/Legal Guardian
03	Spouse
04	Caregiver
99	Other